AMA DE PERIODI I MANIFORMA - U IMMA Complete and send wis form, together with a cable fee(s), to: Mail Mail Stop ISSUE I Commissioner for bacents P.O. Box 1450 Alexandria, Virginia 22313-1450 JUN 2 3 2005 (703) 746-4000 or Fax INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESTONDENCE ADDRESS (Note: Use Block I for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 04/22/2005 Brinks Hofer Gilson & Lione Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, of the date indicated below. P.O. Box 10395 Chicago, IL 60610 06/24/2005 FFANAIA3 00000036 10662737 Gustavo Siller, Jr. (Depositor's name) 1400.00 DP (Signature 01 FC:1501 02 FC:1504 300.00 DP 68 (Date 03 FC:8001 30.00 OP APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/662,737 09/15/2003 Kinshiro Takadate 9281-4637 1322 TITLE OF INVENTION: NONRECIPROCAL CIRCUIT ELEMENT AND METHOD OF MANUFACTURING THE SAME APPLN. TYPE SMALL ENTITY ISSUB FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 07/22/2005 **EXAMINER ART UNIT** CLASS-SUBCLASS JONES, STEPHEN E 2817 333-024200 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 BRINKS HOFER (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, **GILSON & LIONE** (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ALPS ELECTRIC CO., LTD. Tokyo, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🛄 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies 10

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